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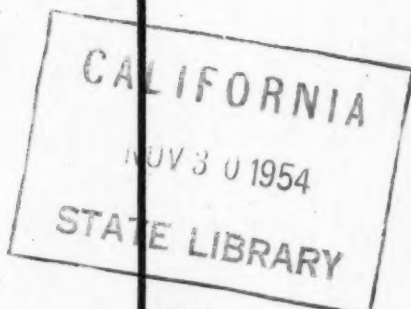
# Bulletin on Current Literature

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The monthly bibliography for  
workers with the handicapped

*The* **NATIONAL SOCIETY**  
*for* **CRIPPLED CHILDREN and Adults, Inc.**  
11 SO. LA SALLE ST., CHICAGO 2, ILL.

• SINCE 1921 THIRTY-THREE YEARS OF SERVICE

# The NATIONAL SOCIETY



*for*

## CRIPPLED CHILDREN *and* ADULTS

Founded in 1921, the National Society for Crippled Children and Adults, the Easter Seal Society, is a nationwide federation of fifty-two state and territorial societies dedicated to the purpose of helping crippled children and adults. This objective is implemented through a three-fold program:

Education of the public as a whole, of professional persons concerned with the care and treatment of the crippled, of the families of the crippled, particularly parents, and of volunteers and employers.

Research to provide increased knowledge of the causes and prevention of crippling, and of improved methods of care, education and treatment of crippled children and adults.

Direct services to improve the health, welfare, education, recreation and employment opportunities for the crippled, toward the goal of rehabilitation.

### IMMEDIATE PROGRAM AND SERVICES

Services are determined by unmet needs, existing facilities, resources of the Society

and availability of trained personnel and include case finding, diagnostic clinics, medical care, physical, occupational, and speech therapy, treatment centers, rehabilitation centers and curative workshops, mobile clinics, special education, social service, psychological services, sheltered workshops and homebound employment, promotion of employment opportunities for the crippled, recreation, and provision of equipment and prosthetic devices.

The National headquarters provides professional consultation in program planning and community organization to state and local member societies. It maintains liaison with medical specialty groups, offers legislative guidance, a nationwide lending library devoted to literature on handicapping conditions, and a free national personnel registry and employment service which recruits and refers professional workers. It also has an active program of professional education, including scholarships and fellowships, summer workshops for training of professional personnel, exhibits at professional meetings and the publication and distribution of printed materials.

11 SOUTH LA SALLE STREET :: CHICAGO 3, ILLINOIS







New Addition to the Library's Periodical Collection

Eugenics Quarterly, American Eugenics Society, Room 1523, 230 Park Ave., New York 17, N. Y. Vol. 1, No. 3, Sept., 1954. \$3.00 a year. Quarterly.

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ACCIDENTS

1090. Schulzinger, Morris S. (340 Reading Rd., Cincinnati 2, Ohio)  
The accident syndrome; a clinical approach. Natl. Safety News.  
Oct., 1954. 70:4:116-117, 219-224.

"In his private practice in Cincinnati during the past 25 years, Dr. Schulzinger has handled 35,000 accident cases and this experience forms the basis of the conclusions presented here . . . ." The study was not limited to industrial accidents; patients were of all social, economic and cultural levels; and accidents occurred in the home, at work, in public places, at schools, and on the road. Detailed analysis of the material yielded statistics on the influence of age, sex, season, type and frequency of anatomical distribution of injury. This article is limited to the more important findings and conclusions.

ADOLESCENCE

1091. U. S. Children's Bureau  
The adolescent in your family. Washington, D. C., The Bureau, 1954. 110 p. (Children's Bur. publ. 347-1954)  
The fifth in a series of bulletins based on sound research in child development and designed as a sourcebook for parents, this publication stresses the underlying needs of the adolescent boy or girl and examines problems familiar to parents of teenage children. Experts from a wide variety of professional fields, including child psychiatry and psychology, parent and family education, nursing, social work and cultural anthropology, and pediatrics reviewed the bulletin and made helpful suggestions to Mrs. Marion L. Faegre, the writer.  
Available from U. S. Superintendent of Documents, Washington 25, D. C., at 25¢ a copy.

APHASIA

1092. Thurston, John R. (VA Hosp., Madison, Wis.)  
An empirical investigation of the loss of spelling ability in dysphasics. J. Speech and Hearing Disorders. Sept., 1954. 19:3:344-349.  
A report of a study designed to gather empirical data through an investigation and comparison of the oral spelling behavior of dysphasics, brain-damage patients and normal hospital patients. Each subject responded orally to a list of 80 spelling words so divided as to constitute four levels of increasing difficulty. Results showed dysphasics achieved inferior performance on the test as a whole when compared to normals; inferiority was particularly marked on the more difficult words. Low education and old age reduced spelling performance in the same general manner as dysphasia when words became more difficult. Brain-damage patients resembled the dysphasic group but did not show the marked decrease in performance as shown by dysphasics.

#### ARTHRITIS--EQUIPMENT

1093. New York. New York University-Bellevue Medical Center. Institute of Physical Medicine and Rehabilitation.  
Self-help devices for the arthritic, by Edward W. Lowman. New York, The Institute, 1954. 123 p. illus. (Rehabilitation Monograph VI)  
A comprehensive guide to the solution of the arthritic's problems in daily living activities, it pictures and describes the use of such special devices as bathroom aids, beds, wheelchairs, crutches, chairs, utility sticks, and home energy-saving devices. Devices are useful in such activities as dressing, feeding, writing, and personal hygiene. Names of manufacturers and stores where the devices may be purchased are included.  
Available from Institute of Physical Medicine and Rehabilitation, 400 East 34th St., New York 16, N. Y., at \$1.00 a copy.

#### ARTHRITIS--MEDICAL TREATMENT

1094. Kuhns, John G. (372 Marlboro St., Boston, Mass.)  
The management of arthritic disabilities of the knee. Phys. Therapy Rev. Oct., 1954. 34:10:510-512.  
A discussion of the physical therapy measures used in treating disabilities resulting from inflammation of the knee with pain on motion, swelling, and muscular spasm, as well as disabilities resulting from contractures and articular changes. Early support and adequate physical therapy will usually lead to subsidence of the inflammation and prevent late disabilities. Where deformity persists, appropriate orthopedic and surgical measures usually restore good function.
1095. Rudin, Louis N. (5901 Ayleshire Rd., Baltimore 12, Md.)  
Physical medicine and rehabilitation in rheumatoid arthritis. Current Medical Digest. Oct., 1954. 21:10:87-89, 92, 97-98.  
Dr. Rudin stresses the fact that newer therapies have enlarged the scope and usefulness of physical therapy in the treatment of rheumatoid arthritis. He discusses the use of rest and activity, heat, massage, and exercise in the acute and subacute phases of the condition, and the rehabilitation measures to be employed with patients in the chronic phase. Two pages of illustrations show various types of apparatus used in therapy treatments.

#### AUDIOMETRIC TESTS

1096. California. State Department of Education (Sacramento 14, Calif.)  
A guide for hearing testing of school children in the public schools of California; recommendations of California State Department of Public Health and . . . Sacramento, The Dept., 1954. 28 p.  
A pamphlet planned to help school administrators, health officers, school physicians, audiometrists, and other school health personnel in setting up and administering a hearing testing program. It covers frequency of hearing tests, equipment, qualifications and responsibilities of personnel, criteria for retesting and referral, and the medical, educational, and vocational aspects of a follow-up program. Legal provisions in California pertaining to hearing testing and hearing conservation of school children are included.

#### AUDIOMETRIC TESTS (continued)

1097. Siegenthaler, Bruce M. (Speech and Hearing Clinic, Pa. State Univ., State College, Pa.)

A speech reception threshold test for children, by Bruce M. Siegenthaler, Jack Pearson, and Raymond J. Lezak. J. Speech and Hearing Disorders. Sept., 1954. 19:3:360-366.

"A speech hearing threshold test using a picture identification technique with carefully selected stimulus words and pictures for children as young as three or four years is described. The test meets the criteria of an acceptable speech threshold test, meets the special needs of a test for children, has a close relationship with spondee threshold for a group of adults, and high correlation with pure tone average hearing loss for a group of children. The two forms of the test are essentially equal . . . ."

Summary. Experience with the Picture Identification Test has indicated its usefulness to the clinical audiologist.

#### BLIND--EMPLOYMENT

1098. U. S. Office of Vocational Rehabilitation (Washington 25, D. C.)

Counselors guide; how to analyze the rehabilitation needs of blind persons on the farm, by J. Hiram Chappell. Washington, D. C., The Office, 1954. 30 p. (Rehabilitation Service ser. no. 160, revised)

A booklet to aid the counselor in analyzing rehabilitation needs of the blind person living on the farm and persons desiring to engage in farm activity in some capacity. It contains information concerning existing facilities, agencies and organizations providing services to farmers, and, in addition, a list of rural occupations in which blind and partially sighted persons have successfully engaged.

#### BLIND--PSYCHOLOGICAL TESTS

1099. Ammons, Carol H. (Dept. of Psychology, Univ. of Louisville, Louisville, Ky.)

"Facial vision;" the perception of obstacles out of doors by blindfolded and blindfolded deafened subjects. Am. J. Psychology. Oct., 1953. 66:4:519-553. Reprint.

". . . The purpose of the present study was twofold: (1) to determine whether the results and conclusions of the Cornell studies--which were conducted indoors in a large enclosed hall--could be duplicated when the experiments were conducted outdoors under conditions approximating more nearly those met by the blind in everyday life; and (2) to discover whether every person with normal hearing--blind and blindfolded alike--is able to acquire the ability to perceive obstacles--a consequence of the conclusion that audition is the necessary and sufficient condition . . . ."

1100. Claassen, Robert

Tests for the blind. Internatl. J. for the Education of the Blind. Oct., 1954. 4:1:12-15.

Brief descriptions of four performance tests which, in some form, should be useful in testing young blind children and students having additional handicaps such as deafness, speech impediments, or insufficient acquaintance with English. The first two are especially intended to measure the student's ability in analysis and synthesis.



## BLIND--SPECIAL EDUCATION

See 1142.

## BRACES

1101. Thompson, T. Campbell (321 E. 42nd St., New York 17, N. Y.)  
Forearm flexion device controlled by hip motor, by T. Campbell  
Thompson (and others). Orthopedic & Prosthetic Appliance J. Sept., 1954.  
8:3:17-20.

A description of the component parts of a brace devised to aid a seven year old girl with almost complete paralysis of both upper extremities from poliomyelitis. She had a potential functional right hand which demanded some type of special apparatus to aid her in placing the hand where she wished. Operation of the brace is described briefly, with a list of daily living activities which it enables the child to perform. The article is illustrated with photographs showing its usefulness.

## BRAIN INJURIES--SPECIAL EDUCATION

1102. Sheer, Daniel E. (Dept. of Psychology, Univ. of Houston, Houston, Tex.)  
Is there a common factor in learning for brain injured children?  
Exceptional Children. Oct., 1954. 21:1:10-12.

A consideration of the distinction between primary and secondary effects of brain injury, and some tentative generalizations regarding the primary factors. A deficit in attention and a lowering of emotional mobilization characterize the brain-injured. Increased learning in these children can be accomplished through minimizing distracting influences and concentrating the child's attention on the material to be learned through accentuating figure-background relationships and supplying multiple cues.

## CAMPING

1103. Carter, Joan (155 E. 44th St., New York 17, N. Y.)  
Camping together; handicapped and non-handicapped Girl Scouts.  
Exceptional Children. Oct., 1954. 21:1:2-4, 31.

A report of a project in camping with 18 girls, in the 9 and 10 year age group which included three girls with handicaps. Two were cerebral palsied and the third had residuals from poliomyelitis. Discussed briefly are aspects of their relationship to the other campers, their individual progress, staff relationships, and counselors' methods of leadership. Suggestions are made for dealing with problems presented by handicapped children in the camping situation.

## CAMPING--ILLINOIS

1104. Lyons, William H. (Southern Ill. Univ., Carbondale, Ill.)  
School camp, U. S. A. Ill. School Board J. Sept.-Oct., 1954.  
21:5:23-26.

An account of the development of a 12-year outdoor education program initiated by the Educational Council of 100, composed of representative persons from 31 southern Illinois counties. The program is year-round and provides democratic, informal out-of-doors learning for area children. Study of conservation, biological sciences, physical education, health, social studies, music, dramatics, and art, with opportunities for group work experiences, is planned. Use of the camping situation to give therapeutic help to physically handicapped and underprivileged children is another facet of the program.



## CANCER--MENTAL HYGIENE

1105. Hollender, Marc H., ed.

The patient with carcinoma of the breast. GP (General Practitioner).  
Sept., 1954. 10:3:75-84.

From: Somatopsychic Conference of the University of Illinois College of Medicine.

A panel discussion of the psychic effects of carcinoma of the breast, the question of the patient's reactions to the situation, the problem of telling patients the truth about their chances for recovery and the true nature of the disease.

## CEREBRAL PALSY

See 1178.

## CEREBRAL PALSY--NEW YORK

1106. Kinoy, Sarah Jane (Teachers College, Columbia Univ., New York, N. Y.)

A brief review of some service problems. Cerebral Palsy Rev.  
Sept., 1954. 15:9:6-8.

A discussion of two particularly pertinent problems in community service--the community organization's responsibility to the parent of the "uneducable" child and to parents of the "educable" child, as well. Programs for improved educational services for children with cerebral palsy are the responsibility of community service agencies. Experiences of the Queens (New York) Cerebral Palsy Association are cited.

1107. New York. New York State Joint Legislative Committee to Study the Problem of Cerebral Palsy

Report of the . . . Albany, N. Y., The Committee, 1954. 74 p.  
(Legislative document (1954), no. 44)

A review of the progress made in cerebral palsy services in New York to the present date, with recommendations made by the Committee on the extension of services, better training for physicians, therapists, and nurses, increased state aid for local communities, the establishment of a practice school for the training of teachers to work with the cerebral palsied, and for the development of a plan to discover the names of cerebral palsied children in the state. Data from the State Departments of Education, Health, Mental Hygiene, and Social Welfare are included, and an evaluation of mandatory reporting is made.

Available from William J. Butler, Chairman, N. Y. State Joint Legislative Committee to Study the Problem of Cerebral Palsy, Albany, N. Y.

See also 1114; 1115; 1146.

## CEREBRAL PALSY--DIAGNOSIS

1108. Koven, Leo J. (465 Ocean Ave., Brooklyn, N. Y.)

The athetoid syndrome in cerebral palsy; Part II: Clinical aspects, by Leo J. Koven and Stanley S. Lamm. Pediatrics. Sept., 1954. 14:3:181-192.

An illustrated article showing some of the principle clinical aspects of the athetoid syndrome. The universal characteristics, clinical varieties and other clinical features, as well as the reflex, functional, and orthopedic alterations of these patients, have been discussed.

#### CEREBRAL PALSY--DIAGNOSIS (continued)

1109. Spiegel-Adolf, M. (Temple Univ. School of Med., Philadelphia 40, Pa.)

Cerebrospinal fluid studies in infant children with cerebral palsy and other neurologic disorders, by M. Spiegel-Adolf (and others). Pediatrics. Sept., 1954. 14:3:215-221.

"By means of combined spectographic and chemical studies (the authors) have previously demonstrated changes in the cerebrospinal fluid of patients with various neurologic disorders. This approach was successful especially in cerebral concussion and electroshock treatment, conditions in which routine methods of examination alone fail to detect deviations from the norm. This report summarizes the observations from similar studies in children with cerebral palsy and other neurological disorders . . . ."

A study made possible, in part, by financial assistance from the Pennsylvania Society for Crippled Children and Adults, Inc., and from the Pennsylvania Department of Health through grants for the study and treatment of cerebral palsy.

#### CEREBRAL PALSY--EMPLOYMENT

1110. Fleischer, Ernest (50 W. 37th St., New York 19, N. Y.)

Developing occupational information programs for adults with cerebral palsy. Cerebral Palsy Rev. Sept., 1954. 15:9:4-6.

An outline of an advisory plan for direct aid to the adult with cerebral palsy. The author has helped to set up just such a plan on an experimental basis in four communities whereby guidance is given in occupational aspects and in adjustment to group action.

#### CEREBRAL PALSY--EQUIPMENT

1111. Dorward, Barbara (Atlanta Cerebral Palsy Clinic School, Atlanta, Ga.)

Teaching aids for the development of basic education concepts, by Barbara Dorward and Charlot Rosenberg. Cerebral Palsy Rev. Sept., 1954. 15:9:14-15.

Briefly described and illustrated are two devices created by the authors and adapted to the needs of even the most severely involved cerebral palsied child. A checker board with checkers secured to the board by pegs and a jumbo peg board are this month's contribution. The Review will publish pictures and descriptions of other devices in later issues.

#### CEREBRAL PALSY--INSTITUTIONS--NEW YORK CITY

1112. Adams, Taylor

A residential home for adults with cerebral palsy. Cerebral Palsy Rev. Sept., 1954. 15:9:8-11, 15.

The Director of Pemberton House, a non-profit, tax-exempt membership corporation, which provides a residential home in New York City for cerebral palsied young men, describes the growth of the home, its estimated budget for a year, its staff, and what it offers to these young adults. Speaking from experience, Mr. Adams discusses who should start and operate the residential home, and some of the problems involved in setting up a similar establishment.

#### CEREBRAL PALSY--PHYSICAL THERAPY

See 1144.

## CEREBRAL PALSY--PSYCHOLOGICAL TESTS

See 1184.

## CEREBRAL PALSY--SPECIAL EDUCATION

1113. Denhoff, Eric (293 Governor St., Providence 6, R. I.)

Family influence on successful school adjustment of cerebral palsied children, by Eric Denhoff and Raymond H. Holden. Exceptional Children. Oct., 1954. 21:1:5-7.

Data on a study of 35 preschool cerebral palsied children and their later adjustment to school are presented. Parents were rated on ten characteristics of the "good" family and factors responsible for adjustment of the children are summarized. The authors stress that the key to good school adjustment is family understanding and acceptance. A continuing program of parent education is essential to sympathetic parental understanding of the child's needs. (A preliminary report of this study was listed as #426 in the May 1954 issue of the Bulletin on Current Literature.)

## CEREBRAL PALSY--STATISTICS

1114. Schlesinger, Edward R. (39 Columbia St., Albany 7, N. Y.)

Evaluation of mandatory reporting of cerebral palsy, by Edward R. Schlesinger, Helen C. Chase, and Clark LeBoeuf. Am. J. Public Health. Sept., 1954. 44:9:1124-1133. Reprint.

"Some of the uses to which case reports of cerebral palsy might be put are suggested in a discussion of the paucity of practical information derived from a three-year experience with state-wide compulsory reporting."

"Cerebral palsy has been a reportable condition in Upstate New York since January 1, 1950. The present study is an evaluation of the procedure . . . . Of the 4,375 cases reported, 3229 cases under 18 years of age at the time of report were included in the current study. . . . The many difficulties encountered in interpreting the data from mandatory reporting raise serious questions regarding its reliability for epidemiologic use in studying the problem of cerebral palsy. . . ."--Summary.

## CEREBRAL PALSY--SURVEYS--NEW YORK

1115. Wallace, Helen M. (125 Worth St., New York, N. Y.)

Case-finding of handicapped children, with special reference to cerebral palsy, by Helen M. Wallace (and others). Am. J. Diseases of Children. Sept., 1954. 88:3:298-306.

Describes a follow-up study four years after birth of children born in New York in 1948 who were reported to have had certain birth injuries or congenital malformations. Method of the study and follow-up and results obtained are discussed. Various data compiled from replies to the questionnaire sent to parents are included and analyzed. The study tends to indicate that a follow-up of babies with birth injuries and congenital malformations is productive from the viewpoint of case-finding and aiding handicapped children and their parents.

## CHILD WELFARE--RESEARCH

See 1179.



## CHILDREN'S HOSPITALS--ADMINISTRATION

1116. American Academy of Pediatrics (Dr. Brooks, Univ. of Pittsburgh, Pittsburgh 13, Pa.)

The care of children in hospitals; report by the Committee on Hospitals and Dispensaries, Glidden L. Brooks, Chairman. Pediatrics. Oct., 1954 14:4:401-419.

Material presented is primarily designed to apply to the problem of caring for children in general hospitals. It covers suggestions for the development of services for the convalescent and long term patient, for the well child and the orthopedically handicapped child or those with other special handicaps. It describes briefly the various professional services required in a pediatric service, administration of the children's unit, design and arrangement of the unit, and the responsibility of the general hospital for training of professional personnel. It is hoped that the report will serve as a useful guide in the evaluation of existing pediatric services or in initiating a new one.

## CHRONIC DISEASE--PROGRAMS

1117. Kurlander, Arnold B. (U. S. Public Health Service, Washington 25, D. C.)

Problems of organized home care for the long-term patient. Public Health Reports. Sept., 1954. 69:9:823-828. Reprint.

A discussion of the number and needs of long-term patients, how services may be provided for their care, the desirability of home care, the physician's role, and the position of the local health department in the field of chronic disease control. Dr. Kurlander mentions the variety of patients who could be cared for in this manner, the possible costs of such a program, and its organization.

## CLEFT PALATE--SPEECH CORRECTION

1118. Buck, McKenzie (Speech and Hearing Clinic, Univ. of Fla., Gainesville, Fla.)

Post-operative velo-pharyngeal movements in cleft palate cases. J. Speech and Hearing Disorders. Sept., 1954. 19:3:288-294.

"In clinical procedure much time has been spent in administering exercises intended to strengthen the movement of the velum in a posterior-superior direction and to encourage movement of the pharyngeal wall in an effort to approximate a closure of the velo-pharyngeal valve. Thus far, in the experience of many clinicians, there has been little or no success. Most of the X-ray studies to date have been concerned with the examination of normal structures. The current X-ray study was concerned primarily with unilateral post-operative cleft palate cases. Perhaps the study of these 20 cleft palate cases will explain, in part at least, the lack of successful approximation of these structures in post-operative cases...."

1119. New Zealand. New Zealand Speech Therapists' Association

Cleft palate; a guide for parents and teachers. N. Zealand Speech Therapists' J. Supplement, Nov., 1953. n.p. Mimeo. Compiled and edited by Grace M. Gane, Christchurch Speech Clinic.

Contains an explanation of the condition and how it may be treated by surgery, what parents may do in caring for the child and helping in



## CLEFT PALATE--SPEECH CORRECTION (continued)

speech training. A personal account of the early years of a child born with a cleft palate, written by her parents, is included. The editor has given a list of clinics, suggestions for further reading, and several pages of games and exercises suitable for palate and lip exercise, and breath control.

Available from Mrs. J. P. A. Coote, Speech Clinic, Crammer Sq., Christchurch, N. Zealand, at 1 shilling a copy.

## CONGENITAL DEFECT--STATISTICS

1120. Harris, Lloyd E. (Mayo Clinic and Foundation, Rochester, Minn.)

Abnormalities observed during the first six days of life in 8,716 live-born infants, by Lloyd E. Harris and Arthur G. Steinberg. Pediatrics. Oct., 1954. 14:4:314-326.

"This is a report of the abnormalities, both congenital and acquired, observed during the first six days of life in 8,716 live-born infants. Post-mortem findings are not included. The difficulties encountered in reporting and comparing the incidence and frequencies of abnormalities are discussed, the method of gathering the data is described and terms defined when necessary. The abnormalities are presented according to systems, namely gastrointestinal, respiratory, nervous, genitourinary, skeleto-muscular, blood and cardiovascular, and skin."--Summary.

## CONVALESCENCE--RECREATION

1121. Mazer, June L. (Clinical Center, National Institutes of Health, Bethesda, Md.)

A unique program activity in a clinical center. Recreation. Oct., 1954. 47:8:470-471.

The writer who is occupational and recreational therapist at the Clinical Center describes briefly the purpose of the Center, the physical plant and its equipment, the functions of an activity therapist in a research program and the three major fields of therapy in the program.

## DEAF--ETIOLOGY

1122. Hopkins, Louise A. (Clarke School for the Deaf, Northampton, Mass.)

Heredity and deafness. Eugenics Quarterly. Sept., 1954. 1:3:193-199. Reprint.

A report of a study of the inheritance of deafness, conducted at Clarke School for the Deaf, giving some of the conclusions on hereditary deafness, and discussing the part played by environmental factors in reproducing deafness.

In this same issue is an article titled "Diabetes, Pregnancy and Modern Medicine; A Genetic Misadventure," by Alan F. Guttmacher (pp. 191-192), which discusses the implications of increased fetal salvage of infants born to diabetic patients.

## DEAF--MENTAL HYGIENE

1123. Gorman, Pierre (26 Trinity St., Cambridge, England)

Deaf people in a hearing society. Cambridge, England, The Author, 1954. 4 p. Mimeo.

Paper presented to Section J (Psychology), British Association for the Advancement of Science at Oxford, September 2, 1954.

## DEAF-MENTAL HYGIENE (continued)

A discussion of some of the problems presented by congenital deafness or deafness acquired before the age of three or four. Pros and cons of segregation in school and social life are considered. As the deaf child grows to adulthood, he has a tendency to turn to social groups composed of deaf persons; society's attitudes are partly responsible for this situation.

## DEAF--PSYCHOLOGICAL TESTS

1124. Rutledge, Louis (Dept. of Psychology, Pa. State Univ., State College, Pa.)

Aspiration levels of deaf children as compared with those of hearing children. J. Speech and Hearing Disorders. Sept., 1954. 19:3:375-380.

A report of a study of a group of deaf children matched with a control group of hearing children, both groups being institutionalized. A series of 10 goal-settings on two motor tasks (a balance test and an aspiration board) were completed by both groups. Aspiration and goal-discrepancy scores indicated significant and consistent differences between the two groups only on the task in which the deaf are handicapped. The deaf's lack of confidence expressed itself in their level of aspiration behavior. The study adds further support to evidence which indicates that goal-setting may be somewhat of a stable personality characteristic.

## DECUBITUS ULCER

1125. Gardner, W. James (2020 E. 93rd St., Cleveland 6, Ohio)

The alternating pressure pad; an aid to the proper handling of decubitus ulcers, by W. James Gardner, Ruth M. Anderson, and Michael Lyden. Arch. Phys. Med. and Rehab. Sept., 1954. 35:9:578-580. Reprint.

A report of the results obtained from use of an alternating pressure pad with 100 consecutive cases, 38 of whom already had decubitus ulcers, and 62 who, without the pad, would have required frequent turning to prevent the appearance of ulcers. The pad is in effect a pneumatic mattress placed on top of the ordinary bed mattress. Its beneficial effect is due to alternate shifting of the areas of weight bearing, which prevents prolonged ischemia.

Also in this issue: The prevention and treatment of ducubiti; an editorial, p. 591-592.

## EPILEPSY

1126. Yahraes, Herbert

Epilepsy; the ghost is out of the closet. New York, Public Affairs Committee, 1954. 28 p. (Public Affairs pamphlet no. 98)

A revised edition prepared with the assistance of William G. Lennox, M.D., H. Houston Merritt, M.D., Zira de Fries, M.D., and Harry Sands, Ph.D., of the United Epilepsy Association. It gives facts on the nature of the disease, conditions leading to seizures, characteristic symptoms, treatment, advice on education, marriage, and employment for epileptics, and aspects for prevention of the disease.

Available from Public Affairs Pamphlets, 22 E. 38th St., New York 16, N. Y., at 25¢ a copy.

## EPILEPSY--MEDICAL TREATMENT

1127. Epilepsy; recent progress and practical considerations: A panel discussion. Med. Times. Sept., 1954. 82:9:653-670.

Contents: Moderator's introduction, Robert S. Schwab. -Anatomical and physiological aspects, Jerome K. Merlis. -Pathological aspects, Edward P. Richardson. -Neurological aspects, Joseph M. Foley. -Treatment, Douglas T. Davidson. -Panel discussion.

In addition to those giving papers, members of the panel included Dr. Hannibal Hamlin, Dr. William Lennox, Miss Constance Rathbun, Dr. William W. Sargant, and Dr. Nathan B. Talbot.

1128. Sharpe, D. S. (Botleys Park Hospital, Chertsey, England)  
Primidone in mental deficiency practice. Brit. Med. J. Sept. 11, 1954. 4888:627-629.

A report of a trial of the drug Primidone with 38 mental defective epileptics at Botleys Park Hospital. Results showed improvement in 36.8 percent of those with grand mal epilepsy and in 5.3 percent fits were abolished. Six cases of petit mal showed very poor results, clinically and in E.E.G. Dosage used varied from 0.5 to 2 g. daily according to age. Toxic symptoms were few, mainly drowsiness and some ataxia. In use with children, it was found that behavior deteriorated. Improvement in I.Q. is not thought to be due primarily to the action of primidone on cerebral intellectual functioning.

## HANDICAPPED--EQUIPMENT

See 1093.

## HANDICAPPED--FICTION

See 1180.

## HANDICAPPED--SURVEYS--CANADA

1129. Canada. Department of Labor

Survey of disabled persons registered with the National Employment Service, Montreal . . . prepared by the Rehabilitation Society for Cripples and the Occupational Therapy and Rehabilitation Centre, in collaboration with the Special Placement Units of the National Employment Service. Montreal, The Dept., 1953. 45 p. Mimeo.

Describes the administration of the survey and presents data on age, education, employment history, diagnosis and history of disability, financial, medical and other rehabilitation received, job stability, employability, and need for rehabilitation services.

## HARD OF HEARING--SPEECH CORRECTION

1130. Woods, Elizabeth M. (School for the Deaf, Sumner, N. Zealand)

The assessment and effective use of potential hearing in young children with defective speech. N. Zealand Speech Therapists' J. Nov., 1953, and May, 1954. 8:2 & 9:1. 2 pts.

Part I discusses tests used with children between two and five years of age, based on methods used in the Pre-School Clinic of the Department of Education of Victoria University, Manchester. Part II covers auditory training, the acceptance and use of a hearing aid.



## HARD OF HEARING--SURVEYS

1131. Curry, E. Thayer (Univ. of Ill. Hearing Center, Urbana, Ill.)

Are teachers good judges of their pupils' hearing? Exceptional Children. Oct., 1954. 21:1:15-17, 29.

A report of a hearing survey conducted by the University of Illinois Hearing Center to determine characteristics of the teacher-referred students with hearing loss as contrasted with hearing loss characteristics of students tested in the regular survey. Screening was done by the individual pure frequency test. Results showed that the teacher's judgement in identifying hearing problems is not an efficient or adequate substitution for audiometric examination. Their ability to identify hearing loss problems varied in the different grade levels studied.

## HEART DISEASE (CONGENITAL)--NEW YORK

1132. Wallace, Helen M. (125 Worth St., New York, N. Y.)

Congenital heart disease in a medical rehabilitation program, by Helen M. Wallace, Miriam Lending, and Herbert Rich. J. Pediatrics. Sept., 1954. 45:3:273-284.

Describes the setting up of the New York City program for children with congenital heart disease, and presents data on the first 129 children who were cared for under the medical rehabilitation program. Data covers extent of coverage of children by the program, soundness of community planning, number requiring and receiving surgery, type of diagnostic work-up, results to the child, change in school placement, and length and cost of hospitalization. Implications of the findings for improvement in administration of the program and in the care of handicapped children are discussed.

A second paper in this series will appear later, covering services for children with congenital cardiac anomalies in the rest of New York State.

An editorial on p. 370 of this same issue points to the program as an example of a trend in medical economics which might serve as a pattern of future developments. Findings of strictly medical importance as demonstrated by analysis of the New York experience are discussed.

## HEREDITY

See 1122.

## HOBBIES

1133. Michigan. Michigan State College. Cooperative Extension Service

Horticultural therapy. East Lansing, The College, 1954. 6 p. (Extension folder F-181)

A leaflet explaining a new medium of therapy for the improvement of physical and mental well-being. It suggests techniques for therapists and outlines the values of such therapy for patients.

Available from D. B. Varner, Director, Cooperative Extension Service, Michigan State College, East Lansing, Mich.

## HOSPITAL SCHOOLS

1134. Freund, Margaret (620 Starr Ave., Toledo, Ohio)

The long term patient in a hospital school. Exceptional Children. Oct., 1954. 21:1:13-14, 32.



## HOSPITAL SCHOOLS (continued)

The value of a hospital school for long term patients and some of the activities included in such a program are described. The teacher's part in providing not only the basic educational skills but also the psychological help necessary for the child to adjust to his hospitalization and illness is explained.

## INSURANCE (HEALTH)

1135. Gelperin, Abraham (Des Moines Health Dept., Des Moines, Iowa)

Hospital insurance against poliomyelitis in Des Moines, Iowa, 1952. Public Health Reports. Sept., 1954. 69:9:818-822. Reprint.

A report of a study of the status of hospitalization protection by various types of health insurance during a severe epidemic of poliomyelitis in Des Moines, Iowa, in 1952. A high degree of privately purchased protection against hospital cost was shown by hospital billing. Data are presented on payment sources by socio-economic groups, types of insurance, and pertinent morbidity data.

## MENTAL DEFECTIVES--MEDICAL TREATMENT

See 1128.

## MENTAL DEFECTIVES--PSYCHOLOGICAL TESTS

1136. Papania, Ned (Wayne Co. Training School, Northville, Mich.)

A qualitative analysis of the vocabulary responses of institutionalized mentally retarded children. J. Clinical Psychology. Oct., 1954. 10:4: 361-365.

A report of a study to determine whether institutionalized mentally retarded children follow developmental trends similar to those evidenced by children with average intelligence (normals) in their ability to define words abstractly and to determine whether this ability was directly predictable from the MA. Results indicated a real difference, in abstract verbal behavior; the retarded child gave fewer "abstract" definitions and more "concrete" definitions to the Binet vocabulary words. No differences between average and retarded groups in the proportion of correct definitions were noted. While the number of acceptable definitions seems to be directly related to the MA, the qualitative level of the response does not.

## MENTAL DEFECTIVES--SPECIAL EDUCATION

See 1177.

## MENTAL DEFECTIVES--SPEECH CORRECTION

1137. Schlanger, Bernard B. (Vineland Training School, Vineland, N. J.)

Environmental influences on the verbal output of mentally retarded children. J. Speech and Hearing Disorders. Sept., 1954. 19:3:339-343.

Reports the testing of 21 matched pairs of mentally retarded children from city and institution community environments on verbal output and the comparisons of mean sentence length and words per minute scores. Significant differences were found and lower language output of institutionalized children was attributed to loss of speech motivation, complete association with peers and overstimulation from such constant contact. Severance of familial ties was considered a block to language development.

## MENTAL HYGIENE

1138. Sharp, M. U.

Young disabled people in Kent; a study. Social Service. Sept. -Nov., 1954. 28:2:67-71.

The Welfare of the Disabled, no. 10.

The writer gives his impressions of some of the social problems of the young chronic sick and disabled in the county of Kent (England), gathered in fifteen months' research. His study included those between 15 and 45 years and excluded the blind, deaf, dumb, epileptic, mentally defective, the psychotic, those with pulmonary tuberculosis and anyone in full-time employment whatever the degree of disability.

## MONGOLISM--ETIOLOGY

1139. Penrose, L. S. (University College, London, England)

Observations on the aetiology of mongolism. Lancet. Sept. 11, 1954. 267:6837:505-509.

A review of the known facts about the genetics of mongolism and familial incidence. The tendency for some mothers to be predisposed to have affected offspring seems demonstrable. The writer does not believe abnormal cytoplasm to be the sole cause nor should fresh mutation be considered a probable explanation of mongolism. Precipitating environmental influences which may be nutritional or hormonal require intensive investigation, in his opinion.

## MONGOLISM--MENTAL HYGIENE

1140. Blacketer-Simmonds, D. A. (Stoke Park Colony, Bristol, England)

An investigation into the supposed differences existing between mongols and other mentally defective subjects with regard to certain psychological traits. J. Mental Science. Oct., 1953. 99:417:702-719.

Reprint.

Reviews briefly the literature on mental disposition and behavioral characteristics in mongols and reports a study of temperament and musical aptitudes of 140 mongols at Stoke Park Colony, to determine whether they conformed to the usual text-book descriptions. Statistical examination of the findings showed only three significant differences between the two groups investigated. Mongols appeared to be less docile, more mischievous, and more solitary. They do not appear to conform generally to any characteristic temperamental type and no significant differences were observed in character traits investigated or in their response to music and rhythm.

## MUSCULAR DYSTROPHY--BIOGRAPHY

1141. Stocker, Joseph

All it takes is brains. Today's Health. Oct., 1954. 32:10:40-42, 44-45.

The heartening story of Homer D. Kind, "king" of California's weekly newspaper publishers, who though paralyzed completely from the neck down, lives a full life. Daily he goes to his office, handles much of the detail work, travels frequently, and crusades for community improvement.

## MUSIC

1142. Dunford, Benjamin C. (S. Carolina School for the Deaf and Blind, Spartanburg, S. C.)  
What price good music? Internatl. J. for the Education of the Blind. Oct., 1954. 4:1:8-10.

Stressing the value of music in schools for the blind, the writer feels that students should be made aware of the many different types of music and allowed to form their own opinions with the instructor making clear what is good music. Better use of contemporary American music is urged.

## MUSIC THERAPY

See 1181.

## MYASTHENIA GRAVIS

1143. Kibrick, Sidney (300 Longwood Ave., Boston 15, Mass.)  
Myasthenia gravis in the newborn. Pediatrics. Oct., 1954. 14:4:365-386.

"This paper presents three cases of transitory myasthenia of the newborn, three probable cases of the same syndrome, and one case of congenital myasthenia gravis. The features of these two conditions are discussed, their etiologies considered, and all of the previously reported cases are reviewed...."

## NEUROLOGY

1144. Bobath, Berta (Cerebral Palsy Center, 3 Park Crescent, London W. 1, England)  
A study of abnormal postural reflex activity in patients with lesions of the central nervous system, I. Physiotherapy. Sept., 1954. 40:9:259-267.

"This paper is the result of an analysis of the motor behavior of patients with various lesions of the central nervous system. The majority of cases were children suffering from cerebral palsy.... A number of cases were adults suffering from cerebral palsy, or of residual hemiplegia due to vascular accident or head injury, while a few were of disseminated sclerosis and Friedreich's ataxia...."--Introduction. This is Part I of a thesis on which a Fellowship has been awarded by the Chartered Society of Physiotherapy; in this part the tonic or standing reflexes are described. The second part will give a description of higher postural reflexes, such as the righting reflexes and the equilibrium reactions.

See also 1151.

## NURSERY SCHOOLS

1145. Almy, Milly (Teachers Coll., Columbia Univ., New York, N. Y.)  
Principles and practices of nursery education. Exceptional Children. Oct., 1954. 21:1:18-21.

A restatement of nursery school principles and the practices which have grown out of them, the role of the nursery school teacher in relation to the child, the home and family living, and her ability to accept the child as he is. Adaptations in the nursery school program for the exceptional child need not be drastic; his needs are fundamentally the same as the "normal" child.



## NURSERY SCHOOLS (continued)

1146. Heilman, Grace G.

Needs and resources for group learning of cerebral palsied children of pre-elementary school age in New York City. New York, Coordinating Council for Cerebral Palsy in New York City, 1954. 47 p. Mimeo.

In the course of her field work as a student in the New York School of Social Work, Mrs. Heilman spent the major portion of her assignment in the Cerebral Palsy Clinic of the Hospital for Special Surgery, New York City. Her observation of the combined program of therapy and nursery school, begun as an experiment, led her to a study of similar facilities for cerebral palsied children in the vicinity of New York City. In this thesis for the M. S. degree she discusses the special needs of the handicapped child, the registration of cerebral palsied children in New York City, and gives a classified list describing group resources for cerebral palsied children of pre-elementary level.

Available from Coordinating Council for Cerebral Palsy in New York City, 47 W. 57th St., New York 19, N. Y.

## OCCUPATIONAL THERAPY

1147. Quiggle, Arthur B. (Univ. of Minn., Minneapolis, Minn.)

Metabolic requirements of occupational therapy procedures, by Arthur B. Quiggle, Frederic J. Kottke, and Jean Magney. Arch. Phys. Med. and Rehab. Sept., 1954. 35:9:567-572.

A report of a study to measure the energy consumption and cardiac output required by various standard occupational therapy procedures. The four activities thus graded in terms of energy requirements were chip carving, leather carving, table weaving, and hand sawing. One general statement is made from the data collected thus far--that increase in cardiac output appears to parallel the increase in oxygen consumption for the different activities studied. Plans have been made to continue the study, testing other occupational therapy activities.

See also 1133.

## OLD AGE--NEW YORK

1148. New York. New York State Joint Legislative Committee on Problems of the Aging. (Sen. T. C. Desmond, Chairman, State Senate, Albany, N. Y.)

Growing with the years. Albany, The Committee, 1954. 159 p. illus. (Legislative document (1954) no. 32).

"...In this report, some of the foremost authorities in the nation in medicine, education, social work and employment report on progress which has been made to enlarge human understanding about our oldsters. But, even more important, they contribute their findings and views on what still needs to be done to make people, as they grow older, better able to reach their own personal goals; and to ease the plight of the aged by creating a climate of opinion more favorable to their continued growth and well-being...."--Thomas C. Desmond, Chairman.

Gives some statistical data on employment in New York State of older people, state action to date for the welfare of older people, and brief digests of public hearings in Rochester and Watertown.



## PARALYSIS AGITANS--MEDICAL TREATMENT

1149. Cooper, Irving S. (477 First Avenue, New York 16, N. Y.)  
Surgical occlusion of the anterior choroidal artery in parkinsonism.  
Surgery, Gynecology, and Obstetrics. Aug., 1954. 99:207-219. Reprint.  
"The rationale and anatomic basis of anterior choroidal artery occlusion in parkinsonism, as well as operative technique, selection of patients, favorable results, and complications which occurred in a pilot series of 30 operations have been reviewed in this presentation."--Summary. Three case reports are included.
1150. Spiegel, E. A. (Temple Univ. Med. School, Broad and Ontario Sts., Philadelphia 40, Pa.)  
Ansotomy in paralysis agitans, by E. A. Spiegel and H. T. Wycis.  
Arch. Neurology and Psychiatry. May, 1954. 71:598-614. Reprint.  
"A stereotaxic method for localizing and producing lesions of the ansa lenticularis (ansotomy) has been developed using the foramen of Monro and the anterior commissure as reference points. Ansotomy is able to reduce, and in some instances, almost completely eliminate the Parkinsonian tremor on the opposite side. These results could be obtained with preservation of volitional movements or without increase of muscle tone or disturbance of sensation. The ability to perform alternate movements, e.g., flexor-extensor movements of the fingers, may even be increased and rigidity sometimes diminished....Based upon these experiences and upon animal experiments...a working hypothesis regarding the mechanism of the Parkinsonian tremor is outlined...."--Summary and conclusions.

## PARAPLEGIA--EQUIPMENT

See 1101; 1125.

## PARENT EDUCATION

See 1158; 1182.

## PHYSICAL THERAPY

1151. Voss, Dorothy E. (Calif. Rehab. Center, Vallejo, Calif.)  
Patterns of motion for proprioceptive neuromuscular facilitation, by Dorothy E. Voss and Margaret Knott. Brit. J. Phys. Med. Sept., 1954. 17:9:191-198.  
Various patterns of facilitation, basic to other techniques of proprioceptive neuromuscular facilitation, are described, giving the components of the motion and the muscles contracting from origin to insertion, in each case. "... The patterns are most easily observed in the normal subject and are not related to pathological reflexes. The versatility of muscles in the patterns seems to progress from proximal to distal...."

## PHYSICAL THERAPY--PERSONNEL

1152. American Physical Therapy Association (1790 Broadway, New York 19, N. Y.)  
Non-professional personnel in a physical therapy department.  
New York, The Assn., c1954. 12 p.

## PHYSICAL THERAPY--PERSONNEL (continued)

A brief pamphlet making recommendations for the use of non-professional assistants to provide better and more service to patients, giving examples of job assignments, how to train the non-professional on the job, and a list of questions for the physical therapy supervisor to use in periodic review and evaluation of performance and for determining the need of additional personnel in her department.

## POLIOMYELITIS--EQUIPMENT

See 1101.

## POLIOMYELITIS--MEDICAL TREATMENT

1153. Clark, J. M. P.

The prevention of deformity in poliomyelitis. Brit. Med. J. Sept. 18, 1954. 4889:669-672.

A discussion of the causes of deformity, the effects of pain and muscle spasm in the acute stage, methods of controlling contracture of fibroelastic tissues, surgical correction of tendon transposition in cases of muscle imbalance, and the correction of perverted action of normal tendons caused by paralysis or weakness of other muscles. Steady deterioration which would yield an intractable problem can be controlled by preventive surgery, the writer believes. The surgeon should anticipate rather than reconstruct.

1154. Martz, Carl D. (Indiana Univ. Medical Center, Indianapolis, Ind.)

Early care of poliomyelitic patients, by Carl D. Martz and Frances C. Ekstam. Phys. Therapy Rev. Oct., 1954. 34:10:507-510.

Outlines six major problems of the poliomyelitic patient which must be solved if satisfactory living function is to be achieved. Therapeutic measures to be employed in the solution of these problems are mentioned.

## POLIOMYELITIS--MENTAL HYGIENE

1155. Arnold, Nancy (Univ. of Minn. Hospitals, Minneapolis, Minn.)

The adjustments of adolescents to poliomyelitis; a study of six patients. J. Pediatrics. Sept., 1954. 45:3:347-361.

A report of a study of six young people with paralytic residuals and their parents, interviewed at least three years following the acute attack of poliomyelitis. Questions asked covered what are considered the four major problems: 1) personality of the patient before onset of poliomyelitis, 2) psychologic reaction during the acute stage, 3) psychologic alterations during the rehabilitation state, and 4) present attitudes toward the disease and life goals. The study indicates the value of rehabilitation for parents also.

See also 1167.

## POLIOMYELITIS--PROGRAMS

See 1135.

## POLIOMYELITIS--SPECIAL EDUCATION

1156. Goffin, John L. C. (451 N. Hill St., Los Angeles 17, Calif.)

Poliomyelitis in the school child. Nursing Outlook. Sept., 1954. 2:9:466-468.

## **POLIOMYELITIS--SPECIAL EDUCATION (continued)**

Muscle weakness in children who have had nonparalytic poliomyelitis often appears late and may not be recognized as such. The school nurse is responsible for alerting teachers and parents to signs and symptoms of residual weakness which may result in deformity or even emotional disturbances. Where the child has more severe involvement, special schools or homebound instruction can provide the education necessary for independence in adult life.

## **PSYCHOLOGICAL TESTS**

1157. Pfeifer, Edward Joseph

Comparison of counseling problems and emotional adjustment of handicapped and non-handicapped high school pupils. Madison, Wis., Univ. of Wis. Pr., 1954. 2 p.

Reprinted from: Summaries of Doctoral Dissertations, Univ. of Wis., 1954. Vol. 14, pp. 384-385.

A report of a study made to investigate the relationship of physical disability to the counseling problems and emotional adjustments of pupils nearing the completion of high school. Subjects selected were interviewed to determine the existence of potential employment handicaps. Tests on occupational interest revealed the handicapped chose Personal-Social and Business job descriptions more frequently but little relationship existed between the Personal-Social interests and the length of hospital experience for the group. Neurotic tendencies, defensive test-taking attitudes, problems in the area of social relations, and a feeling of being misunderstood by people were indicated by the handicapped. Objective type tests and inventories used differentiate between handicapped and non-handicapped at statistically significant levels. Teachers and counselors in secondary schools who assist physically handicapped pupils will find implications for special techniques in counseling.

## **PSYCHOLOGY**

1158. American Psychological Association

The school psychologist aids the parent of the crippled child; a symposium co-sponsored by Division of School Psychologists and Division of Educational Psychology of the . . . , American Speech and Hearing Association, and the National Society for Crippled Children and Adults. Chicago, National Soc. for Crippled Children and Adults, c1954. 38 p.

Contents: Foreword, Jayne Shover. -Role of the psychologist as a member of the team of professional workers with parents of a child with a handicap, T. Ernest Newland. -Services to parents, Boyd McCandless. -Summary of workshop findings and conclusions. -Selected film list. -Bibliography.

Available from the National Society for Crippled Children and Adults at \$1.25 a copy.

## **RECREATION--EQUIPMENT**

1159. Levine, Milton I.

Toys for your office? Medical Economics. Feb., 1954. 4 p. Reprint.

Dr. Levine, who is associate attending pediatrician at New York Hospital-Cornell Medical Center, believes a well-stocked play corner



## RECREATION--EQUIPMENT (continued)

is an essential not only for the pediatrician but for all physicians who treat children. He gives suggestions for judging the general suitability of toys to be used in the doctor's office and some standards for testing their durability and safety. Dr. Levine has served for some years as a member of the Advisory Committee of the American Toy Institute.

Available from National Society for Crippled Children and Adults or from American Toy Institute, 200 Fifth Ave., New York 10, N. Y.

## REHABILITATION

1160. David, George W.

Rehabilitation; resource and opportunity. Louisiana Welfare. July, 1954. 14:3:6-10, 21.

A discussion of the place of the public assistance worker in rehabilitation programs, in counseling the disabled to seek such services and in serving as the link between the handicapped and the rehabilitation team.

This article is a summary of a paper presented at the American Public Welfare Association, Regional Conference, Shreveport, April 1, 1954.

1161. Desmond, Thomas C.

Rehabilitation for employment. Today's Health. Oct., 1954. 32:10:28-29, 64-66.

The author who is chairman of the New York State Joint Legislative Committee on Problems of the Aging tells of the need for rehabilitation of the older worker, its value to the individual and to the national economy. The provision of sheltered workshops for those unable to return to full employment in a competitive labor market can supply the means for self-support and increased health and well-being for the handicapped worker.

## REHABILITATION--ILLINOIS

1162. Rodriquez, Arthur A. (723 W. 111th St., Chicago, Ill.)

Integrated plan returns patients to community life, by Arthur A. Rodriquez and Joseph L. Koczur. Arch. Phys. Med. and Rehab. Sept., 1954. 35:9:580-586.

A brief description of a new program operated by the Chicago Department of Welfare for the rehabilitation of medically indigent and frequently chronic cases. The Convalescent Service of the Department operates a convalescent home which provides care for specific disabilities, physical retraining, and psycho-social, and vocational rehabilitation. Diagnostic assessment and definitive medical and surgical care are provided by community hospitals. Some data are included on the experience of the Home to date. A discussion of the report is given by Dr. Murray Ferderber of Pittsburgh.

## REHABILITATION--LOUISIANA

1163. Pellegrin, Margaret D. (Jefferson Parrish Dept. of Public Welfare, Gretna, La.)

Venture in rehabilitation planning. Louisiana Welfare. July, 1954. 14:3:17-20.

Describes a project in rehabilitation evolved in Jefferson Parrish, Louisiana, using the team approach. A panel comprised of a physician, a counselor of the Vocational Rehabilitation Division, a representative of

## REHABILITATION--LOUISIANA (continued)

Louisiana State Employment Service specializing in placing handicapped persons, and aided by members of the Public Welfare Department, reviewed cases presented for evaluation and possible rehabilitation services. An evaluation of the entire program is planned after it has been in use a sufficient length of time to assess results.

## REHABILITATION--SOUTH AFRICA

1164. South African Medical Journal. Aug. 21, 1954. 28:34.

Entire issue devoted to the subject.

Contents: Rehabilitation, an editorial. -Some industrial aspects of rehabilitation of the handicapped, E. R. Savage. -Rehabilitation; summary of address, W. G. Paterson. -Physical medicine in rehabilitation; its scope and problems, A. L. Lomey. -Psychiatric aspects of rehabilitation, M. B. Feldman. -Alcoholism in industry; a pilot project for the conservation of man-power, Boris Serebro. -Rehabilitation; medical aspects with special reference to rehabilitation by feeding, J. F. Brock. -Rehabilitation; the hospital point of view, A. J. Hugo. -The general practitioner's views on rehabilitation, M. A. Robertson. -Some vocational aspects of rehabilitation of the handicapped, C. Wilfrid Wright. -The orthopaedic aspects of rehabilitation; rehabilitation as a national problem, G. T. Du Toit.

## REHABILITATION--RESEARCH

1165. Margolin, Reuben J. (VA Hospital, Brockton, Mass.)

Action research and its application to medical rehabilitation. Am. Arch. Rehabilitation Therapy. Sept., 1954. 2:3:2-9.

The historical development and the importance of action research in medical rehabilitation are discussed. Differences between action research and traditional research are pointed out, and varieties, techniques and methods of action research are reviewed. Suggestions are made for projects and the conditions necessary for their implementation. The relationship between research action and in-service training was stressed as integral to a complete program of medical rehabilitation.

## RELIGION

1166. National Council of Churches of Christ in the U. S. A. (79 E. Adams St., Chicago 3, Ill.)

The church and the handicapped. Chicago, The Council, c1954. 38 p. 35¢.

Articles reprinted from: Internatl. J. of Religious Education.

Contents: Handicapped persons need the church, Marian Howard. -Some facts about the handicapped, Eveline E. Jacobs. -In their human relationships, Eveline E. Jacobs. -Acceptance of handicapped persons, Harold Wilke. -A place in the church program, Harold Wilke. -Serving handicapped persons of institutions, Dr. Anne H. Carlsen. -The mentally handicapped, Archie S. Oliver, Jr. -Helping handicapped persons develop faith, Richard E. Lentz. -What I do; what my church does, William C. Murphy. -Sources of information about the handicapped; selected books and pamphlets. -National voluntary health agencies and their publications.

1167. Wendland, Leonard Virgil (Ranchos Los Amigos, Hondo, Calif.)

Some religious feelings of the post-poliomyelitic. J. Social Psychology. 1953. 38:99-108. Reprint.

## RELIGION

An objective evaluation of some of the religious feelings of a group of post-poliomyelitic patients in the clinic of the Orthopaedic Hospital, Los Angeles, California. Clinic patients are charity patients under 21 years of age at time of treatment. Median age of subjects at the time of the study was 32.2 years for males, 34.7 years for females. Statistical data are given on age of onset, marital status, and residual physical involvement. Religious affiliation, attitudes toward illness as punishment from God, belief in faith healing, religion as a social outlet, acceptance of handicap in terms of religious affiliation, and reactions to the idea of a separate service for the handicapped were studied.

## RH FACTOR

1168. Jones, Margaret H. (Univ. of Calif. Med. School, Los Angeles 24, Calif.)  
Longitudinal study of the incidence of central nervous system damage following erythroblastosis fetalis, by Margaret H. Jones (and others). Pediatrics. Oct., 1954. 14:4:346-350.

Data gathered in a study of 100 unselected cases of erythroblastosis fetalis treated at Children's Hospital (Los Angeles) in the newborn period and followed from six months to five years are presented. The purpose of the study was to determine the relation of central nervous system signs in the newborn period to neuromuscular handicap and later overall development. Certainty of later normality in infants showing no definite or equivocal central nervous system involvement in the newborn period can not be assured and it is suggested that all erythroblastotic infants be followed up until six or eight years of age.

## SECONDARY SCHOOLS

1169. U. S. Office of Education

Teaching rapid and slow learners in high schools; the status of adaptations in junior, senior and regular high schools enrolling more than 300 pupils. Washington, D. C., Gov't Print. Off., 1954. 97 p. (Bul. 1954, no. 5)

A booklet representing the cooperative effort of nine secondary-school specialists in the Office of Education and describing provisions used in large high schools for adapting teaching methods for pupils who are not average. Material in each field was gathered and tabulated by these specialists, with an interpretation of the tabulations. Chapters cover purpose and scope of the study, administrative provisions for both types of learners, techniques used in discovering these pupils, and instructional provisions in English, social studies, mathematics, science, home economics, and industrial arts. A brief discussion of ways of improving instruction in local communities is given. Questionnaires used in the study have been found useful in inservice education activities.

Available from U.S. Superintendent of Documents, Washington 25, D. C., at 35¢ a copy.

## SEGREGATION AND NONSEGREGATION

See 1103; 1123.



## SPECIAL EDUCATION

1170. Teaching the "different" child. Grade Teacher. May, 1954. 12 p.  
Reprint.

Contents: The slow learner, Helen Hagerman. - The gifted child, Ruth Anne Korey. - The retarded child, Harold A. Delp. - The hard-of-hearing child, Milton Eastman. - These boys have trouble: With leading, Paulinea K. Sipes; With reading, Grace Hunter. - The mentally handicapped, Musa Tellier. - The teacher, the parent and the gifted child, the retarded child, Margaret Hill.

Distributed by the Educational Publishing Corp., Darien, Conn.

## SPECIAL EDUCATION--PERSONNEL

1171. Lerner, Arthur (Lincoln High School, Los Angeles, Calif.)

Information and responsibility; a philosophy for teachers of exceptional children. Exceptional Children. Oct., 1954. 21:1:8-9.

A listing of some of the basic necessities for teachers working with exceptional children--mainly, a knowledge and appreciation of what approximates normal personality, skill in the art of interdisciplinary relationships, and cooperation between teachers and administrators in recognizing and meeting the needs of exceptional children.

## SPEECH CORRECTION

1172. Carrell, James (Speech and Hearing Clinic, Univ. of Washington, Seattle 5, Wash.)

An experimental study of the possible relation between speech and spelling errors, by James Carrell and Kathleen Pendergast. J. Speech and Hearing Disorders. Sept., 1954. 19:3:327-334.

Spelling errors of 33 experimental and 33 control subjects were determined by an inspection of all written work in school over a two-month period, to test the hypothesis that errors in spelling may be related to functional articulatory defects of the type displayed by children with mildly delayed speech, or that common etiological factors may underlie both types of errors. Data gathered in the present study seem to show that if any such relationships exist they may be sought in other areas than those involved in this research. The writers feel that data confirm that inferior phonetic discrimination ability may be of etiological significance in some proportion of the population of children with functional articulatory defects of the type included in this study.

See also 1183.

## SPEECH CORRECTION--PARENT EDUCATION

1173. Eisenson, Jon (Queens College, Flushing, N. Y.)

Has your child a speech difficulty? Parents Mag. Oct., 1954. 29:10:40-41, 129-133.

"As the director of a speech and hearing clinic the author has been consulted by hundreds of parents. Few are more upset and anxious than the parent who asks, 'Is there something really wrong with my child's speech?' Here are the answers to that question and to many related ones." Some of the problems Dr. Eisenson discusses are faulty articulation, omissions, substitutions and distortions, speech defects such as stuttering, cleft palate, retarded speech, and defective sound production.

## SPEECH CORRECTION--PSYCHOLOGICAL TESTS

1174. Hill, C.

Problems connected with the intelligence assessment of children with defective speech. N. Zealand Speech Therapists' J. May, 1954. 9:1:(7-10).

Assessment of intelligence is necessary to decide whether speech therapy is practicable, to determine the level and type of therapeutic approach and to assist in an accurate diagnosis of the difficulty. The writer discusses the value of various types of tests and the difficulty encountered in administering them to children with language or other handicaps. Retardation, feelings of inadequacy, social or emotional maladjustment often influence results of testing and psychologists must be aware of these factors in reporting intelligence levels.

## STUTTERING

1175. McDonald, Eugene T. (Speech and Hearing Clinic, Pa. State Univ., State College, Pa.)

Store clerks' reaction to stuttering, by Eugene T. McDonald and James V. Frick. J. Speech and Hearing Disorders. Sept., 1954. 19:3: 306-311.

"A questionnaire of 25 items divided into eight feeling categories was administered to 50 store clerks to determine their feelings immediately after having been asked a question by a severe stutterer. The data indicated that feelings of impatience, amusement and repulsion will be encountered only rarely by the stutterer while feelings of surprise, embarrassment, pity, curiosity and sympathy will be experienced by the listener with varying degrees of frequency. Implications for stuttering therapy were discussed and the importance of a continuing program of public education was emphasized."--Summary.

## VOCATIONAL REHABILITATION--GREAT BRITAIN

1176. Richardson, I. M. (Univ. of Aberdeen, Aberdeen, Scotland)

The Aberdeen Resettlement Clinic. Almoner. Sept., 1954. 7:6: 213-218.

The writer refers to the Clinic as a "modest but so far successful experiment begun in 1952 and now established as part of the work of the Department of Social Medicine in the University of Aberdeen and the Almoners' Department of Aberdeen Royal Infirmary." Selection of cases, assessment of occupational potentialities, cooperation of social and medical personnel in the scheme, and a brief discussion of progress to date are given. Forthcoming articles by the social workers at the Clinic will describe problems and procedures in more detail.

## WRITING

1177. Kvaraceus, W. C. (84 Exeter St., Boston, Mass.)

Handwriting needs of mentally retarded children and of children in regular grades. Elementary School J. Sept., 1954. 55:1:42-44. Reprint.

A report of a study of samples of script obtained from pupils in two special classes for the mentally retarded and from pupils in regular classes. Frequency and type of handwriting errors were analyzed and presented in tabular form, with observations and implications drawn from

## WRITING (continued)

the data. Handwriting difficulties did not appear to be peculiarly associated with mentally retarded children. The experiment illustrates a practical analytical technique for determining handwriting needs of children both in regular and special classes.

### New Books Briefly Noted

## CEREBRAL PALSY

1178. Courville, Cyril B.

Cerebral palsy; a brief introduction to its history, etiology, and pathology, with some notes on the resultant clinical syndromes and their treatment. Los Angeles, San Lucas Pr., 1954. 80 p. illus. \$2.50.

Written for the enlightenment of the general practitioner and the medical student, this book discusses new concepts concerning the cause of the disorder and measures being taken to correct or compensate for its crippling residuals. Especially helpful are the chapters on diagnosis and evaluation, the elements in prognosis, and principles of various therapies employed in treatment. Some practical problems met in advising parents of cerebral palsied children are discussed briefly. An extensive bibliography is included.

Available from San Lucas Press, 316 N. Bailey St., Los Angeles 33, Calif., at \$2.50 a copy.

## CHILD WELFARE--RESEARCH

1179. U. S. Children's Bureau (Washington 25, D. C.)

Research relating to children; an inventory of studies in progress, reported November 1, 1952-May 31, 1954. Washington, D. C., The Bureau, 1954. 195 p. (Bul. II, Suppl. 2)

This volume, for research use only, represents a supplement to Bulletin II of Research Relating to Children and includes reports of ongoing research reported to the Clearinghouse for Research in Child Life. Masters' theses are not reported in this volume; these were abstracted in Supplement I. Subjects covered are research in: pregnancy and newborn growth and development, mental health and emotional disorders, physical health and disease, education and social, economic, and cultural factors.

Only a limited number of copies are being published; these are available only to libraries, heads of departments and directors of research.

## HANDICAPPED--FICTION

1180. Downes, Anne Miller

Speak to me, brother. Philadelphia, J. B. Lippincott Co., c1954. 288 p. \$3.50.

The story of the six Macrae children and their widowed mother, crippled by arthritis, their trials and tribulations surmounted by faith and family solidarity, and happiness and security eventually achieved. Phil, the oldest son left hunchbacked from a childhood episode of tuberculosis of the spine, accepts the role of breadwinner to provide for the family and send his two younger brothers to college. Mainstay of the family household is Valeria, the oldest daughter, whose love story provides the thread of the story.



## MUSIC THERAPY

### 1181. National Association for Music Therapy

Music therapy, 1953; third book of the proceedings of the . . . .  
Mariana Bing, ed. Lawrence, Kan., The Assn., 1954. 261 p. illus.

Contains papers presented at the Fourth Annual Conference of the Association, held at Michigan State College, October 19-21, 1953. Subjects covered by the book include the dynamics and applied techniques of music therapy in work with children, with tuberculous patients, in geriatrics, in religious programs, and in surgery. Chapters are devoted to the volunteer in the music therapy program, the education program for music therapists, and research in the field. "Music for the Cerebral Palsied Child," was contributed by Harriet Nordholm.

Available from The Allen Press, P.O. Box 4, Lawrence, Kansas, at \$5.20 a copy.

## PARENT EDUCATION

### 1182. McCullough, Wava

Illustrated handbook of child care from birth to six years, compiled and illustrated by Wava McCullough, assisted by Marcella Gawronski. New York, McGraw-Hill Book Co., 1954. 231 p. illus. \$4.00.

Written by a practical nurse with many years experience in caring for babies and children, this book with its more than 400 illustrations shows step-by-step how to feed, bathe, dress, and care for the baby. A section is included on care of the sick child and what to do in case of accidents. Suggestions are given for equipping a suitable play area and providing proper toys, and how to choose and instruct the baby sitter. The handbook is not intended to substitute for the doctor's professional advice but to serve as an everyday guide in child care.

## SPEECH CORRECTION

### 1183. Van Riper, Charles

Speech correction; principles and methods. 3d ed. New York, Prentice-Hall, 1954. 582 p. \$5.75.

New points of view and new techniques have been added to this basic text on the nature, causes, and treatment of the various speech disorders and defects. The emphasis of the author is on the child or adult who cannot speak correctly and who may suffer emotionally. Research findings have been brought up to date and increased references have been made to public school speech therapy practice. Popular as were the first and second editions, this revision with its new material is sure to be a more useful book for the speech therapist, student and classroom teacher.

## Psychological Tests

## CEREBRAL PALSY--PSYCHOLOGICAL TESTS

### 1184. Burgemeister, Bessie B.

Columbia mental maturity scale; ages 3-12, by Bessie B. Burge-meister, Lucille Hollander Blum, and Irving Lorge. Yonkers, N. Y., World Book Co., 1954. Kit of 100 test cards, with manual, pp. 13. Individual test. 1 form. Untimed, (15-30) minutes. Test cards, 6 by 19 inches.

# CEREBRAL PALSY--PSYCHOLOGICAL TESTS (continued)

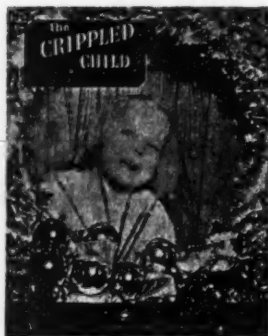
Research begun in 1947 under an initial grant from the New York State Association for Crippled Children led to the development of this Scale, designed to test the intelligence of cerebral palsied children and those with severe motor or speech handicaps. Cards are mostly in color and contain from 3 to 5 drawings each. The one picture different from or unrelated to the others is to be chosen and the objects are generally in the range of experience of handicapped children, even those with limited backgrounds. No verbal response is necessary; pointing or nodding suffices. Test score is easily converted to mental age and IQ values. Standardization of the test was achieved through use with 957 normal children, ages 3-12, who also took the Stanford-Binet (Form L).

Available from World Book Co., 313 Park Hill Ave., Yonkers 5, N. Y., at \$35.00 for the kit with manual. Record blanks available at 85¢ per 35.

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